

Union

Today's date: / /

Parish where you live

Job title: _____ Are you using the Profiles for work? — Yes
No

What you do?:

___ The Office of Public Health (OPH): ___ A Community Based Organization or nonprofit
 ___ Regional Office ___ Public access - like library, schools or internet
 ___ Central Office ___ Other (Please specify) _____
 A state agency (besides OPH)

| Sent/given to me unsolicited | Requested it | Searched it out and got it myself | Don't remember |
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Fold

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|---------------------------|----------------------------|---|-----------------------------------|------------|
| Confused my understanding | Confirmed my understanding | Added a little more to my understanding | Added greatly to my understanding | No opinion |

Missing a topic you wanted to read about: _____

Missing depth, you wanted more information in the topics it covered _____

Other: _____

☐ To write grants
☐ To learn more about my parish
☐ To do presentations
☐ To get ideas for community planning
 Other: _____

THE LEAST useful to you?

| | |
|----------------------------------|----------------------------------|
| 1. _____ 2. _____ 3. _____ | 1. _____ 2. _____ 3. _____ |
|----------------------------------|----------------------------------|

Data Being Clear (*you understood the information*)

____ Needed to be more clear ____ Met my needs ____ Was overdone on being clear

Comments:

| | | |
|---|--------------|--|
| Needed to be easier to find information | Met my needs | Was overdone on pointing out information |
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Comments:

| Needed more information | Met my needs | Had too much information |
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Comments:

| Needed more inspirational examples | Met my needs | Had too many inspirational examples |
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Comments:

| Needed more useful information | Met my needs | Was overdone on the useful information |
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Comments:

We would like to call a random selection of the people who answered this questionnaire to ask a few more questions about the Parish Health Profiles. Do you mind if we call you later to ask your opinion of the profiles and how you used them?

- ☐ Yes, you can call/contact me
☐ No

If you don't mind being contacted, please provide us with a way to contact you:

Name: _____

Address: _____

Phone: _____

Times you can be reached at this number: _____

e-mail: _____

7. **In the next issue of the Parish Health Profiles would you be interested in obtaining more information on a particular topic?**

- ☐ Yes
☐ No
☐ If yes, which topic? _____

We are always in the process of redesigning the Parish Profiles to make them as effective as possible. Please list any changes you would like to see made in the next edition of the profiles.

Comments:

Parish Profile Evaluations
Policy, Planning and Evaluation
325 Loyola Ave, Rm 515
New Orleans, LA 70112

Tape here

Office of Public Health
Policy Planning and Evaluation
325 Loyola Ave., Rm 515
New Orleans, LA 70112

